App#	SFD2305-01	11
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Harnett County Department of Public Health

Improvement Permit

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Revised . was	1
for Det who	1
GITV.	

4 A	ouilding permit cannot be issued with only an Improvement Pe	ermit PD (CD 4204)		
	THE PROPERTY OF THE PROPERTY O	HIII RI) (5R 1291)		
ISSUED TO: New Home Inc	SUBDIVISION Duncan's Creek	LOT # 120		
Site Improvements required prior to Construction Authorization issuance:				
turn al Grandway 44'x62' SFD				
Proposed Waslewater System Type: 25% reduction	on			
Projected Daily [low 481] GPD				
Number of bedrooms: 4 Number of Occupa	nts: 8max			
Basement 🔲 es 🔀 No	and the state of the state of			
Pump Required: Ves Ho K Hay be requir	ed based on final location and elevations of facilities	Permit valid for: Five years		
Type of Water Supply: Community Kill Public	Well Distance from well	☐ No expiration		
Parmy conditions:				
1, 1	LEIH Date: 9-13-			
Andrewed Street August Made The	PF/H Date: 4-13-	SEE ATTACHED SITE SKETCH		
The itwance of this permit by the Health Department in no way guaran	tees the assuance of other permets. The permet holder is responsible for checks	ing with appropriate governing bodies in meeting their requirements. This		
up a subject to revocation of the size plan, plat, or the intended use cl	langes. The Improvement Fermit than not be affected up a change in uniter-	tilk bil the 2-te. Likit betillit is souther to emishioner ann ent kanada an		
the Laws and Rules for Sewage Treatment and Disposal and to condition	of this permit			
	Controling Authorization			
	Construction Authorization			
	(Required for Building Permit)	the second section of the section		
The construction and installation requirements of Rules 1950, 1952 15	54, 1955, 1956, 1957, 1958 and 1959 are incorporated by references in	to this permit and shall be met systems shall be instance in accommic		
with the attached system layout				
ISSUED TO: New Home Inc	PROPERTY LOCATION: 20 Be	acon Hill RD (SR 1291)		
BSULU IU. HEW FIGHTE THE	SUBDIVISION Duncan's C	reek LOT # 120_		
facility Type: 44'x62' SFD				
A A TO V. TO No. Recomment first	ures? T Yes X No			
Basement: Lites And Basement That	on and	(Initial) Wastewater Flow: 480 GPD		
Type of Wastewater System" 25% reduction [Initial] Wastewater Flow: 480 GPD				
(See note below, if applicable)	tion(Repair)			
	Number of trenches 1			
Installation Requirements/Conditions	Exact length of each trench 240 feet	Trench Spacing: 9 Feet on Center		
Septic Tank Size 1000 gallons	Trenches shall be installed on contour at a	Soil Cover: 6inches		
Pump Tank Size gallons	Maximum Trench Depth of: 30-16 inches	(Maximum soil cover shall not exceed		
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)		
	•	,		
	in all directions)	inches below pipe		
Pump Requirements: ft 1DH vs	GPM	Aggregate Depth: inches above pipe		
		inches total		
Conditions:				
WATER LINES (INCLUDING IRRIGATION) MUST 6	BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR RI	EPAIR AREA.		
NO UTILITIES ALLOWED IN INITIAL OR REPAIR D	RAIN FIELD AREA.			
	is different from the type specified on the application.	I accept the specifications of this permit.		
"Il applicable / understand the system type specified	is otherent from the type specified on the appreciation	,,		
i		Date:		
Owner/Legal Representative Signature:	the second of the second like second and second sec	eransferred when there a a change in ownership of the site. This		
The Construction Authorization is subject to re-ocation of the one plan plat or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the size Plus Construction Authorization is subject to compliance with the provision of the laws and Authorization is subject to compliance with the provision of the laws and Authorization is subject to compliance with the provision of the laws and Authorization is subject to compliance with the provision of the laws and Authorization is subject to re-ocation of the size plan plat or the intended use changes. The Construction Authorization is subject to re-ocation of the size plan plat or the intended use changes. The Construction Authorization is subject to re-ocation of the size plan plat or the intended use changes. The Construction Authorization is subject to re-ocation of the size plan plat or the intended use changes. The Construction Authorization is subject to re-ocation of the size plan plat or the intended use changes.				
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11/1//	AFH Date	9-11-33		
Authorized State Agent: 1000 Com		9-13-28		
	Construction Authorization Expiration Da	110.		

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Harnett County Department of Public Health Site Sketch

